# **SUMMARY OF SAFETY AND EFFECTIVENESS**

Assigned 510(k) Number

# Sponsor Name and Address

Siemens Healthcare Diagnostics Inc. 5210 Pacific Concourse Drive Los Angeles, CA 90045-6900 (310) 645-8200

#### Contact

Clare Santulli Sr.Regulatory Affairs Specialist (914) 524-2701 (914) 524-3579 fax clare.santulli@siemens.com

### **Device Name**

Trade name: IMMULITE<sup>®</sup> 2000 3gAllergy™ Specific IgE Assay

Classification: Class II

Classification Names: Radioallergosorbent (RAST) Immunological Test System

Regulation Number: 866.5750 Product Code: DHB

Catalog Numbers: L2KUN6 (600 tests)

# **Description of Device**

IMMULITE<sup>®</sup> 2000 3gAllergy™ Specific IgE is a solid-phase, two-step, chemiluminescent immunoassay that exploits liquid phase kinetics in a bead format. ¹¹² (U.S. Patent No. 4,778,751) It represents a significant advance over conventional methods relying on allergens attached to a solid-phase support, such as a paper disk.

The allergens are covalently bound to a soluble polymer/co-polymer matrix, which in turn is labeled with a ligand. The use of an amino acid co-polymer amplifies the amount of allergen that the matrix can support.

**Incubation Cycles:**  $2 \times 30$  minutes.

<sup>&</sup>lt;sup>1</sup> El Shami AS, Alaba O. Liquid-phase *in vitro* allergen-specific IgE assay with *in situ* immobilization. Adv Biosci 1989;74:191–201.

<sup>&</sup>lt;sup>2</sup> Alaba O, El Shami AS. Evaluation of non-specific IgE binding: comparison of two *in vitro* allergen assays. Adv Biosci 1989;74:203-14.

#### Indications for Use

For *in vitro* diagnostic use with the IMMULITE® 2000 Analyzer — for the quantitative measurement of allergen-specific IgE in human serum, as an aid in the clinical diagnosis of IgE-mediated allergic disorders.

### **Establishment Information**

IMMULITE® 2000 3gAllergy Specific IgE assay is manufactured by Siemens Healthcare Diagnostics Inc. at the following locations:

Siemens Healthcare Diagnostics Inc. 5210 Pacific Concourse Drive Los Angeles, CA 90045-6900 FDA Establishment #: 3005250747

#### Predicate

The purpose of this 510(k) submission is for clearance of 6 additional specific allergens, named in the table below, to be used with the IMMULITE<sup>®</sup> 2000 3gAllergy<sup>TM</sup> Specific IgE on the IMMULITE<sup>®</sup> 2000 analyzer.

1 RED MAPLE
2 WHITE HICKORY
3 RED CEDAR
4 SWEET GUM
5 COMMON SAGEBRUSH
6 WING SCALE

FDA clearance was previously obtained for the assay kit and 196 specific allergens and allergen panels (K013134, K021206, K013135 and K021208).

Please note that the FDA clearances indicated above were in the name of Diagnostic Products Corporation which was acquired by Siemens Medical Solutions Diagnostics in July 2006. Siemens Medical Solutions Diagnostics was renamed Siemens Healthcare Diagnostics Inc. on January 1, 2008.

## Precision

Precision studies were performed in accordance with Clinical Laboratory Standard Institute (CLSI) guidance: Evaluation of Precision Performance of Quantitative Methods; Approved Guideline-Second Edition. CLSI document EP5-A2 (ISBN 1-56238-542-9). CLSI, 940 West Valley Road, Suite 1400, Wayne, Pennsylvania 19087-1898 USA, 2004 assaying two aliquots of each test sample in two runs per day on 20 different days. Analysis of variance was used to estimate the within-run and total precision.

Three allergen lots were tested using three positive samples and one negative sample. Intraassay and inter-assay precision for the positive samples were evaluated by calculating the kU/L dose percent coefficients of variation (%CV) for each positive sample. Non-specific binding (NSB) was monitored by testing the negative control sample.

Representative precision claims for each allergen tested are presented below:

Allergen Precision Claims\*

		Within-Run		Total			
Sample	Mean	SD	CV	SD	CV		
	kU/L	kU/L	%	kU/L	%		
	All	ergen = Red I	Maple, Lot 110	0			
Positive #1	2.17	0.073	3.36	0.117	5.39		
Positive #2	3.19	0.096	3.01	0.162	5.08		
Positive #3	12.06	0.452	3.75	0.634	5.26		
	Aller	gen = White l	Hickory, Lot 1	.11			
Positive #1	1.12	0.038	3.39	0.053	4.73		
Positive #2	4.54	0.238	5.24	0.312	6.87		
Positive #3	6.25	0.214	3.42	0.267	4.27		
	All	ergen = Red (	Cedar, Lot 110	)			
Positive #1	1.34	0.056	4.18	0.071	5.30		
Positive #2	7.63	0.393	5.15	0.421	5.52		
Positive #3	10.09	0.521	5.16	0.560	5.55		
	· Alle	ergen = Sweet	Gum, Lot 110	0			
Positive #1	2.70	0.082	3.04	0.139	5.15		
Positive #2	3.00	0.115	3.83	0.154	5.13		
Positive #3	7.97	0.332	4.17	0.502	6.30		
	Allergen = Common Sagebrush, Lot 111						
Positive #1	1.42	0.049	3.45	0.069	4.86		
Positive #2	4.14	0.191	4.61	0.291	7.03		
Positive #3	10.47	0.425	4.06	0.558	5.33		
	Allergen = Wingscale, Lot 113						
Positive #1	1.56	0.056	3.59	0.072	4.62		
Positive #2	5.20	0.246	4.73	0.267	5.13		
Positive #3	9.81	0.324	3.30	0.424	4.32		

<sup>\*</sup> data are representative of one lot on one instrument

# Linearity

For each allergen, two samples were diluted in 2-fold serial dilutions to 5 levels. The undiluted (neat) and diluted samples were tested with the specific allergen to demonstrate linearity at concentrations within the assay limits. Regression statistics for each allergen comparing observed to expected data are presented below.

#### Linearity

Allergen	Regresion Equation	N	Slope	95% CI	Intercept	95% CI
Red Maple	Y = 1.00X + 0.06	12	0.999	0.961-1.037	0.059	-0.124-0.242
White Hickory	Y = 1.00X + 0.06	12	1.004	0.981-1.028	0.062	-0.122-0.246
Red Cedar	Y = 1.00X - 0.01	12	1.003	0.987-1.019	-0.007	-0.081-0.067
Sweet Gum	Y = 1.00X + 0.31	12	0.997	0.965-1.029	0.306	0.051-0.561
Common Sagebrush	Y = 1.00X + 0.62	12	0.999	0.970-1.028	0.615	-0.400-1.270
Wingscale	Y = 1.00X - 0.10	12	0.998	0.981-1.015	-0.098	-0.252-0.056

# Specificity (Inhibition) Studies

Specificity of each allergen was verified through competitive inhibition testing using a single serum sample or pool of sera. A negative sample was used to measure the background response.

To initiate the inhibition experiment,  $70\mu L$  of undiluted and 4 levels of 5-fold serially diluted inhibitor extract were mixed with  $250\mu L$  of sample or pool. This mixture was incubated at room temperature (15-28 °C) for 1 hour allowing the immunological reaction to occur. Each sample mixture containing the inhibitor extract and the appropriate controls was assayed with 1 lot of each allergen. The percent (%) inhibition was calculated according to the following formula:

(Response of pos. control (pos. sample – neg. sample) – sample response with inhibitor extract)
(Response of pos. control (pos. sample – neg. sample) )

X 100

The inhibition study demonstrated that the allergens tested are inhibited by the relevant inhibitor extract in a concentration dependent fashion. Also, the target % inhibition of 50% was met. These results indicate specificity of the red maple, white hickory, red cedar, sweet gum, common sagebush and wingscale specific allergens. Summary inhibition table is presented below.

Red Maple		White H	ickory	Red Cedar	
Inhibitor Concentration (mg/mL)	% Inhibition	Inhibitor Concentration (mg/mL)	% Inhibition	Inhibitor Concentration (mg/mL)	% Inhibition
5	100.00	5	100.00	5	97.59
1	99.04	1	100.00	1	93.78
0.2	96.83	0.2	97.87	0.2	83.63
0.04	79.15	0.04	89.03	0.04	70.98
0.008	0.00	0.008	27.33	0.008	69.28

Sweet Gum		Common S	Sagebush	Wingscale	
Inhibitor Concentration (mg/mL)	% Inhibition	Inhibitor Concentration (mg/mL)	% Inhibition	Inhibitor Concentration (mg/mL)	% Inhibition
5	98.53	5	100.00	5	87.49
1	96.07	1	100.00	1	72.05
0.2	92.61	0.2	100.00	0.2	38.26
0.04	68.03	0.04	89.71	0.04	20.46
0.008	10.15	0.008	69.61	0.008	5.30

# Clinical Studies

Clinical performance of the allergens was demonstated by testing samples from non-atopic individuals and samples from atopic patients with case histories of suspected clinical reactions to the specific allergen or allergy group in the IMMULITE® 2000 3gAllergy Specific IgE assay and comparing results to accompanying clinical information.

Data summary agreement of the IMMULITE  $^{\circledR}$  2000 3gAllergy results to clinical data is presented in the table below.

IMMULITE <sup>®</sup> 2000	Clini	cal Data		
	Clinical	Normal	Total	
Positive	196	37	233	
Negative	92	775	867	
Total	288	812	1,100	
		95.4%	88.3%	
		Specificity	Agreement	
Allergens included: Commo				

IMMULITE® 2000 3gAllergy assay results for all allergens compare well with clinical documentation of presence or absence of signs, symptoms and other diagnostic evidence of allergen sensitivity.

### Conclusions for all Studies

Allergens including red maple, white hickory, red cedar, sweet gum, common sagebrush, and wingscale for use with the IMMULITE® 2000 3gAllergy Specific IgE assay demonstrate acceptable analytical performance including precision, linearity and specificity. IMMULITE® 2000 assay results compare well with clinical documentation of presence or absence of signs, symptoms and other diagnostic evidence of allergen sensitivity. Substantial equivalence was demonstrated to clinical data, supporting the following intended use of the IMMULITE® 2000 3gAllergys Specific IgE assay and the 6 previously listed allergens:

For *in vitro* diagnostic use with the IMMULITE<sup>®</sup> 2000 Analyzer — for the quantitative measurement of allergen-specific IgE in human serum, as an aid in the clinical diagnosis of IgE-mediated allergic disorders.







Food and Drug Administration 2098 Gaither Road Rockville MD 20850

MAR 1 1 2009

Siemens Healthcare Diagnostics Inc. c/o Ms. Claire Santulli Senior Regulatory Affairs Specialist 511 Benedict Avenue Tarrytown, New York 10591

Re: k083314

Trade/Device Name: IMMULITE® 2000 3gAllergy ™ Specific IgE Assay

Regulation Number: 21 CFR 866.5750

Regulation Name: Radioallergosorbent (RAST) Immunological Test System

Regulatory Class: II Product Code: DHB Dated: February 12, 2009 Received: February 13, 2009

Dear Ms. Santulli:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act). You may, therefore, market the device, subject to the general controls provisions of the Act. However, you are responsible to determine that the medical devices you use as components in the [kit/tray] have either been determined as substantially equivalent under the premarket notification process (Section 510(k) of the act), or were legally on the market prior to May 28, 1976, the enactment date of the Medical Device Amendments. Please note: If you purchase your device components in bulk (i.e., unfinished) and further process (e.g., sterilize) you must submit a new 510(k) before including these components in your kit/tray. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, and labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

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Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on the labeling regulation, please contact the Office of In Vitro Diagnostic Device Evaluation and Safety at 240-276-0450. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR Part 807.97). For question regarding postmarket surveillance, please contact—CDRH's Office of Surveillance and Biometric's (OSB's) Division of Postmarket Surveillance at 240-276-3474. For questions regarding the reporting of device adverse events (Medical Device Reporting (MDR), please contact the Division of Surveillance Systems at 240-276-3464. You many obtain other general information on your responsibilities under the Act from the Division of Small Manufactuers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (240) 276-3150 or at its Internet address http://www.fda.gov/cdrh/industry/support/index.html.

Sincerely yours,

Maria M. Chan, Ph.D.

Director

Division of Immunology and Hematology Devices Office of In Vitro Diagnostic Device Evaluation and Safety

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Center for Devices and Radiological Health

Enclosure

# **Indication for Use**

510(k) Number (if known):	)833IH		
Device Name: IMMULITE 3gAller	gy <sup>™</sup> Specific IgE A	ssay	
Indication For Use:			
For in vitro diagnostic use with the measurement of allergen-specific Ig of IgE-mediated allergic disorders.	e IMMULITE 2000 E in human serum, a	Analyzer — for the quantitative as an aid in the clinical diagnosis	
Prescription Use	And/Or	Over the Counter Use (21 CFR Part 801 Subpart C)	
(PLEASE DO NOT WRITE BELOW THIS	LINE; CONTINUE ON	ANOTHER PAGE IF NEEDED)	
Concurrence of CDRH, Office of In	Vitro Diagnostic De	vice Evaluation and Safety (OIVD	)
Division Sign off Office of In Vitro Diagnostic Device Evaluation and Safety	<u> </u>		
510(k) <i>0833/4</i>			